AP20 RECATION 24 MAR 2006

Attorney Docket: 27253U

Not Yeth Assigned

International Application: PCT/EP2004/052377

a. X A check in the amount of \$900.00 to cover the above fees is enclosed.

- b. Please charge my Deposit Account Number: 14-0112 in the amount of \$ cover the above fees. (A duplicate copy of this sheet is enclosed.)
- c. X The Commissioner is hereby authorized to charge any additional fees, which may be required, or credit any overpayment to Deposit Account Number: 14-0112.
- d. \_ Fees are to be charged to a credit card. WARNING: Information on this form may become public. Credit Card Information should not be included on this form. Provide credit card information and authorization on PTO-2038

NOTE: Where an appropriate time limit under 37 CFR 1.494 or 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed to request that the application be restored to pending status.

Send All Correspondence To:

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